VT DEPARTMENT OF HEALTH CLINICAL LABORATORY SPECIMEN COLLECTION for ZIKA VIRUS

Specimen submission must be pre-approved by Infectious Disease Epidemiology 24/7 Phone Number: (802) 863-7240

Testing Process:

- 1. Identify patient who needs testing
- 2. Collect the required information
- 3. Call Infectious Disease Epidemiology at the VT Department of Health for specimen submission approval at their 24/7 phone number (802) 863-7240
- 4. Collect the appropriate specimens
- 5. Fill out the VT Department of Health Laboratory (VDHL) <u>Clinical Test Request Form</u> Micro 220 to submit with the specimen

1. Patient who meets criteria for testing

onset, OR
Any symptomatic* person who had unprotected sexual exposure to a person** who had previously traveled to an area with active Zika transmission, OR
A pregnant woman WITH or WITHOUT symptoms* who had a history of travel to an <u>area with active Zika transmission</u> within the previous 12 weeks, OR
A pregnant woman WITH or WITHOUT symptoms* who had unprotected sexual exposure to a person** within the previous 12 weeks. who had previously traveled to an area with active Zika transmission

Any symptomatic* person with travel to an area with active Zika transmission within previous 2 weeks of symptom

NOTE: Current CDC research suggests that Guillain-Barre Syndrome (GBS) is strongly associated with Zika; however, only a small proportion of people with recent Zika virus infection get GBS. If you have a patient with a GBS diagnosis and a recent travel history to an <u>area with active Zika transmission</u>, call the VT Department of Health at (802) 863-7240 for further guidance on specimen collection for Zika lab testing.

Testing will **not** be approved for asymptomatic men, children or women considering pregnancy. The <u>current CDC</u> recommendation is for women to wait 8 weeks after return from travel to attempt conception.

Men should wait at least 6 months after symptoms start, or last possible exposure, before attempting to impregnate a woman. Men should use condoms or not have sex for at least 6 months after travel to area with active transmission (if asymptomatic) or for at least 6 months from the start of symptoms (or Zika diagnosis).

2. Required Information

Patient's name	Patient's DOB
Patient's demographic information	Pertinent travel history (locations and dates)
If pregnant, estimated delivery date or date of LMP	Clinical symptoms, if symptomatic
Symptom onset dates	Specimens collected and dates of collection

3. Call Infectious Disease Epidemiology at the VT Department of Health: (802) 863-7240

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^{*}Symptoms consistent with Zika virus include acute febrile illness, rash, arthralgia, conjunctivitis, myalgia or headache **Person does NOT need to be a confirmed Zika virus case

4. Collect the appropriate specimens

Person to be tested	Number of days between symptom onset and specimen collection	Type of test	What to collect
Symptomatic, non-pregnant	<14 days	rRT-PCR assay *	1-2 mL of urine AND 1 mL of serum AND 1 mL of whole blood in EDTA lavender-top tube
Symptomatic, non-pregnant	≥14 days to 12 weeks	Zika IgM MAC ELISA	1 mL of serum
Pregnant and symptomatic	< 14 days	rRT-PCR assay *	1-2 mL of urine AND 1 mL of serum AND 1 mL of whole blood in EDTA lavender-top tube
	≥14 days to 12 weeks	Zika IgM MAC ELISA	1 mL of serum
	>12 weeks after return from travel or exposure	Not available	Testing currently not available
Pregnant and asymptomatic	Specimen collected <14 days after return from travel or exposure	rRT-PCR assay**	1-2 mL of urine AND 1 mL of serum AND 1 mL of whole blood in EDTA lavender-top tube
	2 – 12 weeks after return from travel or exposure	Zika IgM MAC ELISA	1 mL of serum
	>12 weeks after return from travel or exposure	Not available	Testing currently not available

^{*} The rRT-PCR assay tests for Dengue, Chikungunya, and Zika. If negative for all three viruses, the Zika IgM MAC ELISA will be performed

Specimen collection and storage instructions

Serum needs to be collected in serum separator tube and centrifuged prior to shipment. Urine needs to be in a
sterile screw top tube. Collect whole blood in a filled EDTA lavender-top tube.

□ Ship specimens cold (2–6°C) or frozen (-70°C) by courier to VDHL.

5. Complete the Vermont Department of Health Laboratory Micro 220 Clinical Test Request Form

Under the Virology section on page 2, beside "Other", write in "Zika". Testing is performed at no charge.

Send to: Vermont Department of Health Laboratory

359 South Park Drive Colchester, VT 05446

(800) 660-9997 or (802) 338-4724

(802) 338-4706 (FAX)

^{**} If negative, the health care provider should request collection of a follow-up serum specimen 2-12 weeks following exposure or return from travel. Follow up specimen will be tested by Zika IgM MAC ELISA.